

CALIFORNIA ACUPUNCTURE BOARD

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State of California
Department of Consumer Affairs
Arnold Schwarzenegger, Governor



APPLICATION FOR LICENSE

See Section 1399.460(c) of the Acupuncture Regulations to determine initial license fee.

1. Name:	
<div style="display: flex; justify-content: space-between;"><div>_____</div><div>_____</div><div>_____</div></div> <div style="display: flex; justify-content: space-between;"><div>Last</div><div>First</div><div>Middle</div></div>	
2. Other name(s) you have used:	
3. Address of Record: (Your address of record is public information and is given to the public upon request.)	

Number and Street / Rural Route (include apartment number, if any)	

City State ZIP Code Country	
4. Telephone Number: (residence) ()	5. Telephone Number: (work) ()
6. Social Security Number: (see disclosure statement) -- --	7. Date of Birth: / / month day year
8. Have you ever been convicted of, or pled nolo contendere to any offense, misdemeanor or felony in any state, the United States, or a foreign country? NOTE: You are required to list any conviction that has been set aside and Dismissed under Section 1203.4 Penal Code or under any other provision of law. (You are not required to list minor traffic violations resulting in fines of \$75.00 or less.)	
<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain on a separate sheet of paper and include dates, charge/violation, location and penalty or disposition.	
Disclosure of social security number (SSN) is mandatory. Section 30 of the Business and Professions and Public Law 94-455 (42 USCA 405(c)(2)(C) authorize collection of your SSN. Your SSN will be used exclusively for tax enforcement purposes, for purposes of compliance with any judgment or order for family support in accordance with section 11350.6 of the Welfare and Institutions Code, or for verification of licensure or examination status by a licensing or examination entity which utilizes a national examination and where licensure is reciprocal with the requesting state. If you fail to disclose your SSN, you will be reported to the Franchise Tax Board, which may assess a \$100.00 penalty against you.	
<h3>STATEMENT OF APPLICANT</h3> <p><i>I hereby certify under penalty of perjury under the laws of the State of California that all statements made herein are true in every respect, and that misstatements, or omissions of material facts may be cause for denial of this application, or for suspension or revocation of a license.</i></p> <div style="display: flex; justify-content: space-between;"><div>_____ Signature</div><div>_____ Date</div></div>	